



Washington State Health Care Authority  
*Public Employees Benefits Board*

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April 5, 2004

TO: Personnel, Payroll and Insurance Offices of Employer Groups

FROM: Susanne Ames, Budget and Rates Manager  
Finance, Legal & Policy, Budget Office

SUBJECT: Fiscal Year 2005 Program Rates – Composite

In accordance with the state's fiscal year adjustments, your new employer funding rates for the Public Employee Benefits Board program will be effective July 1, 2004 through December 31, 2004. The "composite" rates currently available to you are effective only through June 30, 2004, the end of the State fiscal year. Since your billing is currently modeled after the state agency funding rate, **these rates will change for the new fiscal year beginning July 1, 2004 to reflect the new base rate of \$586.18** (an increase from the current rate of \$507.22) as established by CH 276 L2004 PV (ESHB 2459) of the 2004 supplemental operating budget.

The PEBB program administration fee will be \$4.36 for the new fiscal year. This fee ensures that subscriber charges accurately reflect the cost of providing service. The \$4.36 per-subscriber-per-month is included in the composite rate.

A rate sheet titled "Fiscal Year 2005 Program Rates, Composite Active Rates for Political Subdivision Employer Groups" is attached. You are required to send the full base composite contribution (\$586.18) for every eligible employee, even those who have waived medical coverage. The employee portion of the premium will automatically be added to the total rate billed to you. The employee portion is not changing for July but will change in January 2005, when the new plan year begins.

COBRA and self-pay rates will remain the same until January 1, 2005, the beginning of the "new" plan year. You will receive revised rate sheets for COBRA and self-pay subscribers prior to open enrollment. If you have any questions regarding this letter, please contact Sandra Lakey at the Health Care Authority, (360) 412-4201. Sandra Lakey can also be contacted by email at [slak107@hca.wa.gov](mailto:slak107@hca.wa.gov).

Enclosure

cc: Jayne Wallace  
Katie Rogers  
Connie Robins  
Sandra Lakey  
Debbie Haeger  
Kim Grindrod

**Fiscal Year 2005 Program Rates**  
**Composite Active Rates for Political Subdivision Employer Groups**  
**(for 7/1/04 through 12/31/04 only)**

<u>Plan Name</u>	<b>July 1, 2004 Dec 31, 2004 Base Rate</b>	<b>Employee Contributions</b>				<b>Total Base Rates With Employee Contributions</b>			
		<u>Subscriber</u>	<u>Subscriber and Spouse</u>	<u>Subscriber and Child(ren)</u>	<u>Full Family</u>	<u>Subscriber</u>	<u>Subscriber and Spouse</u>	<u>Subscriber and Child(ren)</u>	<u>Full Family</u>
CHPWA	\$586.18	\$ 41.00	\$ 92.00	\$ 72.00	\$ 123.00	\$627.18	\$678.18	\$658.18	\$709.18
Group Health Cooperative of Puget Sound	\$586.18	\$ 43.00	\$ 96.00	\$ 75.00	\$ 128.00	\$629.18	\$682.18	\$661.18	\$714.18
Group Health Options Inc.	\$586.18	\$ 61.00	\$ 132.00	\$ 106.00	\$ 177.00	\$647.18	\$718.18	\$692.18	\$763.18
Kaiser Foundation Health Plan of the NW	\$586.18	\$ 32.00	\$ 75.00	\$ 56.00	\$ 99.00	\$618.18	\$661.18	\$642.18	\$685.18
PacifiCare of Washington, Inc	\$586.18	\$ 80.00	\$ 170.00	\$ 140.00	\$ 230.00	\$666.18	\$756.18	\$726.18	\$816.18
RegenceCare	\$586.18	\$ 81.00	\$ 172.00	\$ 142.00	\$ 232.00	\$667.18	\$758.18	\$728.18	\$818.18
Uniform Medical Plan PPO	\$586.18	\$ 29.00	\$ 68.00	\$ 51.00	\$ 90.00	\$615.18	\$654.18	\$637.18	\$676.18
UMP Neighborhood*	\$586.18	\$ 19.00	\$ 49.00	\$ 34.00	\$ 63.00	\$605.18	\$635.18	\$620.18	\$649.18